

Best Available Copy

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective October 1, 2003

Application or Docking Number:

10/502267

CLAIMS AS FILED - PART I

|                                  | (Column 1)    | (Column 2)               |
|----------------------------------|---------------|--------------------------|
| TOTAL CLAIMS                     |               |                          |
|                                  | NUMBER FILED  | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | 21 minus 20 = | 1                        |
| INDEPENDENT CLAIMS               | 3 minus 3 =   | 0                        |
| MULTIPLE DEPENDENT CLAIM PRESENT |               | <input type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

|  | (Column 1)                       | (Column 2)                         | (Column 3)               |
|--|----------------------------------|------------------------------------|--------------------------|
| AMENDMENT A                                    | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
| Total  | 20                               | Minus 21                           | 0                        |
| Independent                                    | 4                                | Minus 3                            | 1                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |                                    | <input type="checkbox"/> |

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

| RATE      | FEE |
|-----------|-----|
| BASIC FEE |     |
| XS 9=     |     |
| X43=      |     |
| +145=     |     |
| TOTAL     |     |

| RATE      | FEE |
|-----------|-----|
| BASIC FEE | 920 |
| XS16=     | 18  |
| X86=      |     |
| -290=     |     |
| TOTAL     | 938 |

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| XS 9=            |                |
| X43=             |                |
| +145=            |                |
| TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| XS18=            |                |
| X86=             | 200            |
| +290=            |                |
| TOTAL ADDIT. FEE | 200            |

|  | (Column 1)                       | (Column 2)                         | (Column 3)               |
|--|----------------------------------|------------------------------------|--------------------------|
| AMENDMENT B                                    | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
| Total  |                                  | Minus                              |                          |
| Independent                                    |                                  | Minus                              |                          |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |                                    | <input type="checkbox"/> |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| XS 9=            |                |
| X43=             |                |
| +145=            |                |
| TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| XS18=            |                |
| X86=             |                |
| +290=            |                |
| TOTAL ADDIT. FEE |                |

|  | (Column 1)                       | (Column 2)                         | (Column 3)               |
|--|----------------------------------|------------------------------------|--------------------------|
| AMENDMENT C                                    | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
| Total  |                                  | Minus                              |                          |
| Independent                                    |                                  | Minus                              |                          |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |                                    | <input type="checkbox"/> |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| XS 9=            |                |
| X43=             |                |
| +145=            |                |
| TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| XS18=            |                |
| X86=             |                |
| +290=            |                |
| TOTAL ADDIT. FEE |                |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- \* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- \* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- \* The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.